

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	Id NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>FW</i>	<i>32</i>	<i>5/18</i>
FORMALITY REVIEW	<i>MTB</i>	<i>954</i>	<i>6/18/01</i>
RESPONSE FORMALITY REVIEW	<i>4-17</i>	<i>50 1580</i>	<i>09-18-01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final Original	
1	5 8 3 7 1
2	16 13 3 15 6
3	02 02 03 03 04
4	✓
5	✓
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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